

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M35187

Entity Name: D. JUSTIN NILES, P.A.

FILED  
Apr 12, 2011  
Secretary of State

**Current Principal Place of Business:**

200 W. PALMETTO PARK RD.  
SUITE 301  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 W. PALMETTO PARK RD.  
SUITE 301  
BOCA RATON, FL 33432 US

**New Mailing Address:**

FEI Number: 59-2694224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NILES, JUSTIN D  
200 W. PALMETTO PARK RD.  
SUITE 301  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PVS  
Name: NILES, JUSTIN D  
Address: 200 W. PALMETTO PARK RD. STE. 301  
City-St-Zip: BOCA RATON, FL 33432

Title: D  
Name: NILES, JUSTIN  
Address: 200 W. PALMETTO PARK RD. SUITE 301  
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: D JUSTIN NILES

PRES

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date